## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10804743

		CLAIMS A	S FILED - PART I (Column 1)		(Column 2)			SMALL I	ENTITY	OR		R THAN ENTITY
TOTAL CLAIMS			18					RATE	FEE	٦ ٠	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			18 minus 20= *		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			11	inus 3 =	*				43	র ∣		· · · · · · · · · · · · · · · · · · ·
MULTIPLE DEPENDENT CLAIM PI								X43=	14	OR	X86=	
			20					+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	428	OR	TOTAL	·	
	C	LAIMS AS A	MENDE	MENDED - PART II							OTHER	
(Column 1)			T :	(Column 2)		(Column 3)	ı	SMALL	ENTITY	OR 1 I	SMALL	
AMENDMENT A	·	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** :		=		X\$ 9=		or	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
<u> </u>	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		\	.145			+290=	
								+145= TOTAL		OR	TOTAL	
		A	DDIT. FEE	L	OR,	ADDIT. FEE	·					
		(Column 1) CLAIMS		(Colum		(Column 3)	-	<del></del>	ADDI	 1 r		ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT (	CLAIM		Ī	+145=		OR	+290=	
								TOTAL DDIT, FEE		OR A	TOTAL DDIT: FEE	
(Column 1) (Column 2) (Column 3)												
z ŀ		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOL PAID FO	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	-	X43=			X86=	
4	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (	CLAIM		-			OR	7,55=	
	Aba anto: :- :-!			O 40	3# in!:	, j.		+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pai per Previously Paid					found	d in the app	ropriate box	in colu	mn Ji	1